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CONFIRMATION NO. 7373

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
07/110,791	10/21/1987 RULE	530	1643	6137NCI-24

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**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

12/08/1987

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Met after SR Initials	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input type="checkbox"/> No		DC	10	11	3

ACKNOWLEDGMENT

Acknowledged _____

Yes No
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TITLE

HUMAN GENE RELATED TO BUT DISTINCT FROM EGF RECEPTOR GENE

FILING FEE RECEIVED 0.00	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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